Iowa Quality Preschool Program Standards Standard 5: Health Standard 9: Physical Environment



Teleconference March 25, 2008

Objectives

- Further define and clarify Standards 5, Health and 9, Physical Environment
- Identify evidence that may be collected to verify each criteria is being met
- □ Allow for questions



- 26 total criteria
- 1 is required (5.2)
- 21 other criteria must be fully met
 - 85% of the remaining criteria
- Up to 4 criteria need not be fully met, not including 5.2



5.1

Immunizations have to be up-to-date and a current physical must be on file for each child enrolled

Routine screening tests and immunizations are based on the recommendations of the Centers for Disease Control, American Academy of Pediatrics, and the Academy of Family Practice.

5.2 is REQUIRED to be fully met

At least one staff member who has a certificate showing satisfactory completion of **pediatric** first-aid training, including managing a blocked airway and providing rescue breathing for children, **is always present** with **each group** of children. When the program includes swimming and wading and when a child in the group has a special health condition that might require CPR, one staff person who has successfully completed training in CPR is present in the program at all times.



Courses that specifically address first aid for young children are considered pediatric first aid. A general first aid course that does not address the specific needs of young children is insufficient to meet this criterion.

Sources to consider for first aid and CPR courses specific to infants and children include:

American Academy of Pediatrics (http://www.pedfactsonline.com/about_PedFACT_ S.cfm);

American Red Cross (http://www.redcross.org/services/hss/courses/infchild.html);

National Safety Council (http://www.nsc.org/train/ec/catalog/ped.html); and

American Heart Association (http://www.americanheart.org, search Pediatric First Aid).



In some instances, pediatric first aid courses do not include rescue breathing and management of blocked airways. If the pediatric first aid course does not include rescue breathing and management of blocked airways, it must be supplemented with a training that covers these topics. A person who has taken a pediatric first aid course that does not include rescue breathing but who also has a valid CPR certificate meets this criterion.

Documentation of their training must be included in their staff files.

5.7

Diaper changing policy and procedures should be written and included in the program portfolio.



5.8 Hand washing

Alcohol-based hand rubs may be used in lieu of hand washing ONLY as a temporary measure in instances when hand washing is not possible (e.g., while on field trips or otherwise away from the program facility).

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QPPS Standard 5: Health

5.9 Communal water play

Precautions are taken to ensure that communal water play does not spread disease. Children do not drink, no child with open sores plays. Water is changed before a new group comes to participate in the water play activity. Water is drained with each group of children.

A new group is a new group of children in the room (for example, an afternoon class versus the morning class), not a new subgroup of children within the existing group. The activity period is defined by the program but may not exceed one day.

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QPPS Standard 5: Health

5.11 Tooth brushing

The program defines whether the food it serves constitutes a meal or snack. Programs that serve two or more meals must provide at least one opportunity daily for children older than one year for tooth brushing and teeth cleaning. The timing of this opportunity is not specified in the criteria.

If a program serves no meals, they can indicate that they serve no meals on their program portfolio. Programs will not be cited for this criteria if it is a part-time program that serves snacks but no meals.

5.13 Factory sealed food brought from home

The indicator discouraging food brought from home for sharing with others reflects recommendations by the Centers for Disease Control because of the risks in maintaining food safety especially during transport and potential allergic reactions to ingredients that may not be identified.

5.15 Children with special feeding needs

This criterion refers specifically to children with diagnosed food allergies or special nutritional needs because of medical conditions. A program may choose to honor family preferences regarding food (for example, vegetarian or kosher diet) in the absence of a diagnosed food allergy or medical condition without obtaining an individualized care plan by the physician as long as the request conforms with the nutritional guidelines of the US Department of Agriculture's Child and Adult Care Food Program.

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QPPS Standard 5: Health

5.20

Post menus

The program prepares written menus, and posts them where families can see them, and has copies available for families. Menus are kept on file for review by a program consultant



5.21

The program serves meals and snacks at regularly established times. Meals and snacks are at least two hours apart but not more than three hours apart.

The time span is measured from the ending time of the previous meal or snack and the beginning time of the next meal or snack.

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QPPS Standard 5: Health

5.26 No reptiles

Reptiles are not allowed as classroom pets because of the risk for salmonella infection

The Centers for Disease Control also warn against contact with the following animals for children younger than age 5: amphibians (frogs, toads, newts or salamanders), ducklings, chicks and petting zoos.

See: http://www.cdc.gov/healthypets/child.htm

Additional resources

http://www.idph.state.ia.us/

Iowa Department of Public Health

http://www.iowa.gov/educate/content/blogcategory/5 9/904/

Child and Adult Care Food Program information

19 total criteria

- 9 are required
- 8 other criteria must be fully met
 - 85% of the remaining criteria
- 1 of the criteria need not be fully met
- 1 criteria is considered "Emerging" and need not be fully met

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QPPS Standard 9: Physical Environment

Why is physical environment important to quality?

The environment supports relationships, children's development, staff members, and greatly contributes to the ability of a program to convey that they are a caring place.



In a quality preschool the environment should welcome children and families, allow for engagement in a variety of activities, provide space for individual, small group, and large group activities, and support the program's philosophy and goals.

The Physical Environment Standard states, "The program has a safe and healthful environment that provides appropriate and well-maintained indoor and outdoor physical environments. The environment includes facilities, equipment, and materials to facilitate child and staff learning and development."

Criteria 9.1 (Required)

A variety of age and developmentally appropriate materials and equipment are available indoors and outdoors for children throughout the day.

Additional Guidance

Some combination of each are needed indoors and outdoors, but not all are needed both indoors and outdoors.

Criteria 9.6

Program staff provide for an outdoor play area that is protected by fences or by natural barriers to prevent access to streets and to avoid other dangers, such as pits, water hazards, or well.

Additional Guidance
 Focus is on safety and supervision of children

Criteria 9.8 (Emerging)

The findings of an assessment by a Certified Playground Safety Inspector are documented and available on-site. The assessment documents:

- □ That play equipment is safe;
- □ That, the program has corrected any unsafe conditions;
- That an inspection and maintenance program has been established and is performed on a regular basis to ensure ongoing safety;
- □ That the outdoor play area accommodates abilities, needs, interest of age group the program serves

QPPS Standard 9: Physical

Environment

The National Program for Playground Safety

offers a checklist for playground safety.

http://www.playgroundsafety.org/

http://www.playgroundsafety.org/research/
report_card_form.pdf

- Handbook for Public Playground Safety
 http://www.extension.iastate.edu/childcare/q
 rs/files/CPSCPublicPlaygrounds.pdf
- Additional resources: US Consumer Product Safety Commission http://www.cpsc.gov/volstd/publicplayground/publicplayground.html

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- US Consumer Product Safety Commission http://www.cpsc.gov/volstd/publicplayground /publicplayground.html
- National Program for Playground Safety (UNI)

http://www.uni.edu/playground http://nrpa.org/npsi

Criteria 9.9 (Required)
 There is a minimum of 35 square feet of usable space per child in each of the indoor activity

Evidence

areas.

Classrooms may include documentation of size (square footage) and required amount based on number of children

Criteria 9.10 (Required)
Facilities meet Americans with Disabilities Act (ADA) accessibility requirements.
Accessibility includes access to buildings, toilets, sinks, drinking fountains, outdoor play space, and all classroom and therapy areas.



Child Care Centers and the ADA

ADA Information Line 800-514-0301

http://www.usdoj.gov/crt/ada/chcaflyr.htm

Q: What are the basic requirements of title III?

■ The ADA requires that child care providers not discriminate against persons with disabilities on the basis of disability, that is, that they provide children and parents with disabilities with an equal opportunity to participate in the child care center's programs and services.

ADA title III continued

Centers must generally make their facilities accessible to persons with disabilities. Existing facilities are subject to the *readily achievable* standard for barrier removal, while newly constructed facilities and any altered portions of existing facilities must be *fully accessible*.

Making the child care facility accessible

- You have an ongoing obligation to remove barriers to access for people/children with disabilities.
- Existing privately-run child care centers must remove those architectural barriers that limit the participation of children with disabilities if removing the barriers is *readily achievable*, that is, if the barrier removal can be easily accomplished and can be carried out without much difficulty or expense.

Accessibility continued

Centers run by government agencies must insure that their programs are accessible unless making changes imposes an undue burden; these changes will sometimes include changes to the facilities.

- Criteria 9.12
 - Program staff protect children and adults from hazards, including electrical shock, burns or scalding, slipping, tripping or falling.
- Additional guidance
 - Evidence of hazards include things such as unprotected electrical outlets, hanging electrical cords, accessible stoves or heaters, spills that are not cleaned up promptly.

Criteria 9.13

Fully equipped first-aid kits are readily available and maintained for each group of children. Staff take at least one kit to the outdoor play areas as well as on field trips and outings away from the site.

Evidence:

gloves, materials to clean wounds, and materials to stop bleeding

Recommended contents:

- Disposable nonporous gloves
- Sealed packages of antiseptic for cleaning
- Nonglass thermometer for taking a child's temperature
- Bandage tape
- √ Sterile gauze pads
- √ Flexible roller gauze
- ✓ Triangular bandages
- √ Safety pins
- Eye dressing
- ✓ Pen/pencil and notepad

- ✓ Cold pack
- Current first aid guide
- ✓ Water
- Small plastic or metal splints
- ✓ Liquid soap
- Adhesive strip bandages
- ✓ Plastic bags to store cloths, gauze, etc.
- Emergency medication for child with special needs
- List of emergency phone numbers

Criteria 9.14 (Required)

Fully working fire extinguishers and fire alarms are installed in each classroom and are tagged and serviced annually.

Fully working carbon monoxide detectors are installed in each classroom and are tagged and serviced annually.

Criteria 9.14 Additional Guidance

- Hard-wired smoke detectors are acceptable as fire alarms when they can be heard throughout the facility.
- Fire extinguishers are not required in every classroom when all classrooms are equipped with sprinklers or when there is evidence in the program portfolio that the facility otherwise meets the current standards of the National Fire Protection Association (www.nfpa.org)

Criteria 9.14 continued

- Carbon monoxide detectors are not required when the facility
 - □ Uses no fuel-burning sources of power (such as gasoline, natural gas, oil, kerosene, charcoal, coal or wood – for any reason) and;
 - □ Does not include an attached garage
 - Records of service may be included in the program portfolio and not be tagged on the device itself

Criteria 9.15 (Required)

Any body of water, including swimming pools, built-in wading pools, ponds, and irrigation ditches, is enclosed by a fence at least four feet in height, with any gates childproofed to prevent entry by unattended children. To prevent drowning accidents, staff supervise all children by sight and sound in all areas with access to water in tubs, pails, and water tables.

- Criteria 9.19 (Required)
 The facility and outdoor play areas are entirely smoke free. No smoking is permitted in the presence of children.
- Evidence observation and program portfolio policy, posted policy

- Criteria 9.2 (Required per Chapter 16 rules for Statewide Voluntary Preschool Program for Four-Year-Olds)
- The indoor environment is designed so staff can supervise children by sight and sound at all times without relying on artificial monitoring devices.

- Criteria 9.7 (Required per Chapter 16 rules for Statewide Voluntary Preschool Program for Four-Year-Olds)
- The outdoor play area is arranged so that staff can supervise children by sight and sound.



Questions?



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